



## PAR-Q: Physical Activity Readiness Questionnaire

Name of Participant: \_\_\_\_\_

For most people physical activity should not pose any problem or hazard. The physical activity readiness questionnaire has been designed to identify the small number of adults for whom physical activity might be inappropriate or those who should have medical advice concerning the type of activity most suitable for them. Common sense is your best guide when you answer these questions. Please read the questions carefully and answer each one honestly.

	YES	NO
1. Has your doctor ever said that you have a heart condition AND that you should only do physical activity recommended by a doctor?	_____	_____
2. Do you feel pain in your chest when you do physical activity?	_____	_____
3. In the past month, have you had chest pain when you were not doing physical activity?	_____	_____
4. Do you lose your balance because of dizziness or do you ever lose Consciousness (during activity)?	_____	_____
5. Do you have a bone or joint problem that could be made worse by a change in your physical activity?	_____	_____
6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?	_____	_____
7. Do you know of ANY OTHER REASON why you should not do physical activity?	_____	_____

### If you answered YES to one or more questions...

Talk with your doctor and have them fill out a Medical Clearance form (available online or at any center front desk) BEFORE you participate in a personal fitness training session or registration course. Tell your doctor about the PAR-Q and which questions you answered yes to.

### If you answered NO to all the questions...

If you answered NO honestly to ALL the PAR-Q questions, you can be reasonably sure that you can:

- Start becoming more physically active, begin slowly and build up gradually. This is the safest and easiest way to go.
- Take part in a personal fitness trainer appointment; this is an excellent way to determine your basic fitness so you can plan the best way for you to live actively.

*You should delay becoming more physically active if you are NOT feeling well because of temporary illness such as a cold or a fever OR if you are or may be pregnant please consult your physician before becoming physically active.*

### ACKNOWLEDGEMENT OF RISK AND RELEASE

I acknowledge that there are certain risks of injury and I agree to assume those risks which I or my minor child/ward may sustain as a result of participating in the program. I release all claims which may arise against, and agree not to sue, the City of Boulder and its officers, agents, employees, and authorized volunteers on my behalf or the behalf of my minor child/ward as a result of participating in the program. I further agree to indemnify, hold harmless and defend the City of Boulder and its officers, agents, employees and authorized volunteers from any and all claims by other parties resulting from injuries, damages, and losses caused by me or my minor child arising out of, connected with, or in any way associated with the activities of the program. In the event of any emergency, I authorize City officials to secure from any licensed hospital, physician, and or medical personnel any treatment deemed necessary for my minor child's immediate care and agree that I will be responsible for payment of any and all medical services rendered.

Participant Signature and Date: \_\_\_\_\_